TRANSMITTAL		Application Nu	Application Number		10/021,316	
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FORM	First Named Ir	ventor		Mark Lucovsky		
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	Examiner Nam	Examiner Name		Etienne P. Leroux		
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ENCLOSURES (check all that apply)						
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EFS-Web on the date shown below:	Request for Refund					
January 30, 2007 Date Signatur Normi Tovar Printed Name	CD, Number of CD(s) Remarks The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 50-0463 for the above identified patent application.					
SIGNATURE OF ATTORNEY OR AGENT						
Signature /	Reg	j. No.	57,646			
Name of Attorney or Agent	L. A	lan Collins				
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